

Attorney Docket No.: SF0896K

Application No.: 09/768,917

Filing Date: 01/24/2001

Inventor: Alain P. Vicari et al.



PTO/SB92 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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*Michael Biro*

Signature

Michael G. Biro, Reg. No. 46,556

Typed or printed name of person of signing Certificate

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**Documents submitted:**

- |  |   |
|--|---|
| - Transmittal Form - 1 page  | - Fee Transmittal - 1 page IN DUPLICATE |
| - Amendment and Response - 9 pages   | - Extension of Time - 1 page            |
| - Amendment and Request to Correct Inventorship Under 37 CFR 1.48(b) - 2 pages |   |
| - Declaration of A. Vicari - 2 pages   | - Certificate of Mailing - 1 page       |
| - Declaration of C. Caux - 2 pages   | - Return Postcard                       |

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#18  
deloi  
5/10/03

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group Art Unit: 1632 :  
Examiner: Anne Marie Sabrina Wehbe :  
In re application of: : Title:  
Alain P. Vicari *et al.* : CHEMOKINES AS ADJUVANTS  
Serial No.: 09/768,917 : OF IMMUNE RESPONSE  
Filing Date: January 24, 2001 :  
Attorney Docket No.: SF0896 K US :

AMENDMENT AND REQUEST TO CORRECT INVENTORSHIP  
UNDER 37 C.F.R. § 1.48(b)

Kenilworth, NJ 07033  
May 13, 2003

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The amendment that was filed February 28, 2002 in response to the Office Action dated January 11, 2002 resulted in the cancellation of claims so that less than all of the originally named inventors are the actual inventors of the invention now being claimed in the above-identified application.

Therefore, applicants request that Drake LaFace be deleted as an inventor of the invention now being claimed in the above-identified application.

Upon information and belief, the undersigned acknowledges that Drake LaFace's invention is no longer being claimed in the above-identified application.

05/16/2003 SSESHE1 00000119 190365 09768917  
02 FC:1460 130.00 CH

Applicants submit herewith form PTO/SB/17, which authorizes the Office to charge the appropriate fee under 37 C.F.R. § 1.17(i) for this Amendment and Request to applicants' deposit account.

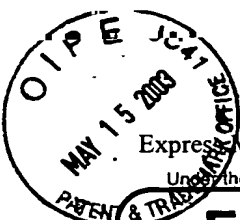
Respectfully submitted,



Michael G. Biro  
Reg. No. 46,556

Schering-Plough Corporation  
Patent Department  
Mail Stop K-6-1, 1990  
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# FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$ 240.00)

## Complete if Known

Application Number 09/768,917

Filing Date January 24, 2001

First Named Inventor Alain P. Vicari et al.

Examiner Name Anne Marie Sabrina Wenzel

Art Unit 1632

Attorney Docket No. SF0896K

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit Account Number  
Deposit Account Name

19-0365

Schering-Plough Corporation

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) during the pendency of this application☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$ )

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims		Fee from below	Fee Paid
Total Claims	<input type="text"/>	-20** =	<input type="text"/>	X	<input type="text"/>
Independent Claims	<input type="text"/>	- 3** =	<input type="text"/>	X	<input type="text"/>
Multiple Dependent	<input type="text"/>				<input type="text"/>

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

(\$ )

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	110.
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify) Amendment & Request 37 CFR 1.17(i)					130.
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)					(\$ 240.00)

## SUBMITTED BY

(Complete if applicable)

Name (Print/Type)	Michael G. Biro	Registration No. (Attorney/Agent)	46,556	Telephone	908-298-5098
Signature	<i>Michael G. Biro</i>	Date	May 13, 2003		

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OMB 0851-0031

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 20

Application Number 09/768,917  
Filing Date January 24, 2001  
First Named Inventor Alain P. Vicari et al.  
Art Unit 1632  
Examiner Name Anne Marie Sabrina Wehbe  
Attorney Docket Number SF0896K

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### ENCLOSURES (Check all that apply)

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form                     | <input type="checkbox"/> Drawing(s)                                       | <input type="checkbox"/> After Allowance Communication to Group                 |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication of Appeals and Interference       |
| <input checked="" type="checkbox"/> Amendment/Reply                          | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication (Appeal Notice, Brief, Reply)     |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information                                |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation                    | <input type="checkbox"/> Status Letter  |
| <input checked="" type="checkbox"/> Extension of Time Request                | <input type="checkbox"/> Change of Correspondence Address                 | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Terminal Disclaimer                              | Declaration of A. Vicari 2 pgs; Declaration of C.                               |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> Request for Refund                               | Amendment & Request 2 pgs; Cert of mailing 1; 1                                 |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> CD, Number of CD(s) _____                        |   |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application    | Remarks _____   |   |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Michael G. Biro, Reg. No. 46,556  
Signature *Michael G. Biro*  
Date May 13, 2003

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